

248777

STATE OF SOUTH CAROLINA

(Caption of Case)

Cricket Communications, Inc.

BEFORE THE  
PUBLIC SERVICE COMMISSION  
OF SOUTH CAROLINA

## COVER SHEET

DOCKET  
NUMBER: 2014 - 43 - C

(Please type or print)

Submitted by: John M.S. Hoefer, Esquire

SC Bar Number: 2549

Address: Post Office Box 8416

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Other:

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NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

## DOCKETING INFORMATION (Check all that apply)

☐ Emergency Relief demanded in petition☐ Request for item to be placed on Commission's Agenda expeditiously☐ Other:

## INDUSTRY (Check one)

- ☐ Electric  
☐ Electric/Gas  
☐ Electric/Telecommunications  
☐ Electric/Water  
☐ Electric/Water/Telecom.  
☐ Electric/Water/Sewer  
☐ Gas  
☐ Railroad  
☐ Sewer  
☒ Telecommunications  
☐ Transportation  
☐ Water  
☐ Water/Sewer  
☐ Administrative Matter  
☐ Other: \_\_\_\_\_

## NATURE OF ACTION (Check all that apply)

- ☐ Affidavit  
☐ Agreement  
☐ Answer  
☐ Appellate Review  
☐ Application  
☐ Brief  
☐ Certificate  
☐ Comments  
☐ Complaint  
☐ Consent Order  
☐ Discovery  
☐ Exhibit  
☐ Expedited Consideration  
☐ Interconnection Agreement  
☐ Interconnection Amendment  
☐ Late-Filed Exhibit  
☐ Letter  
☐ Memorandum  
☐ Motion  
☐ Objection  
☐ Petition  
☐ Petition for Reconsideration  
☐ Petition for Rulemaking  
☐ Petition for Rule to Show Cause  
☐ Petition to Intervene  
☐ Petition to Intervene Out of Time  
☐ Prefiled Testimony  
☐ Promotion  
☐ Proposed Order  
☐ Protest  
☐ Publisher's Affidavit  
☐ Report  
☐ Request  
☐ Request for Certification  
☐ Request for Investigation  
☐ Resale Agreement  
☐ Resale Amendment  
☐ Reservation Letter  
☐ Response  
☐ Response to Discovery  
☐ Return to Petition  
☐ Stipulation  
☐ Subpoena  
☐ Tariff  
☒ Other: FCC Form 555

Print Form

Reset Form

**WILLOUGHBY & HOEFER, P.A.**

ATTORNEYS & COUNSELORS AT LAW

930 RICHLAND STREET

P.O. BOX 8416

COLUMBIA, SOUTH CAROLINA 29202-8416

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ELIZABETHANN LOADHOLT CARROLL  
CHAD N. JOHNSTON  
JOHN W. ROBERTS  
ANDREW J. D'ANTONI

AREA CODE 803  
TELEPHONE 252-3300  
TELECOPIER 256-8062

January 31, 2014

\*ALSO ADMITTED IN TX

**VIA HAND DELIVERY**

The Honorable Jocelyn D. Boyd  
Chief Clerk/Administrator  
**Public Service Commission of South Carolina**  
101 Executive Center Drive  
Columbia, South Carolina 29210

RE: Cricket Communications, Inc.

Dear Mrs. Boyd:

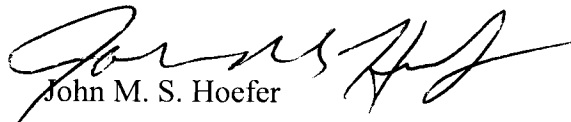
Enclosed for filing on behalf of Cricket Communications, Inc. please find the Federal Communications Commission (FCC) Form 555 – Annual Lifeline Eligible Telecommunications Carrier Certification Form, which is being submitted to the Commission in accordance with FCC regulations.

By copy of this letter, I am providing a copy of this filing to the Office of Regulatory Staff.

If you have any questions or if you need any additional information, please do not hesitate to contact us.

Sincerely,

**WILLOUGHBY & HOEFER, P.A.**

  
John M. S. Hoefer

JMSH/sw  
Enclosures

cc: Honorable C. Dukes Scott  
South Carolina Office of Regulatory Staff

Maheen Siddiqui  
Government Affairs Manager  
Cricket Communications, Inc.

RECEIVED  
FEB 11 2014  
COMMUNICATIONS  
DIVISION

**Annual Lifeline Eligible Telecommunications Carrier Certification Form**

All carriers must complete all or portions of all sections  
Form must be submitted to USAC and filed with the Federal Communications Commission

**IMPORTANT: PLEASE READ INSTRUCTIONS FIRST**

***Deadline: January 31<sup>st</sup> (Annually)***

SC

State

*(An Eligible Telecommunications Carrier (ETC) must provide a certification form for each state in which it provides Lifeline service).*

249001

Cricket Communications

Study Area Code(s) (SAC)

ETC Name(s)

Cricket Communications

Cricket Communications

Holding Company Name(s)

DBA, Marketing or Other Branding Name(s)

Affiliated ETCs (include names and SACs, attach additional sheets if necessary)

*Provide a list of all ETCs that are affiliated with the reporting ETC. Affiliation shall be determined in accordance with section 3(2) of the Communications Act. That Section defines "affiliate" as "a person that (directly or indirectly) owns or controls, is owned or controlled by, or is under common ownership or control with, another person." 47 U.S.C. § 153(2). See also 47 C.F.R. § 76.1200.*

For purposes of this filing, an officer is an occupant of a position listed in the article of incorporation, articles of formation, or other similar legal document. An officer is a person who occupies a position specified in the corporate by-laws (or partnership agreement), and would typically be president, vice president for operations, vice president for finance, comptroller, treasurer, or a comparable position. If the filer is a sole proprietorship, the owner must sign the certification

**Section 1: All ETCs MUST COMPLETE SECTION 1– Initial Certification**

I certify that the company listed above has certification procedures in place either to:

A) Review income and program-based eligibility documentation prior to enrolling a consumer in the Lifeline program, and that, to the best of my knowledge, the company was presented with documentation of each consumer's household income and/or program-based eligibility prior to his or her enrollment in Lifeline or

B) Confirm consumer eligibility by relying upon access to a state database and/or notice of eligibility from the state Lifeline administrator prior to enrolling a consumer in the Lifeline program.

I am an officer of the company named above. I am authorized to make this certification for the Study Area(s) listed above. **Initial** RJI

**Section 2: All ETCs MUST COMPLETE SECTION 2-- Annual Recertification**

*Do not leave empty columns. If an ETC has nothing to report in a column, enter a zero.*

A	B	C
Number of Subscribers Claimed on February FCC Form(s) 497 of current Form 555 calendar year	Number of Lines Claimed on February FCC Form(s) 497 of current Form 555 calendar year provided to Wireline Resellers	Number of Subscribers claimed on the February FCC Form(s) 497 that were initially enrolled in current Form 555 calendar year
3842	0	724

*Initial the certifications below that apply to your ETC and complete the tables corresponding to the certification below. Depending on the state, BOTH CERTIFICATION A AND B MAY APPLY.*

- A) I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. Results are provided in the chart below. I am an officer of the company named above. I am authorized to make this certification for the Study Area(s) listed above. Initial RJI

D	E	F = D-E	G	H = (F+G)	I
Number of Subscribers ETC Contacted Directly to Recertify Eligibility Through Attestation	Number of Subscribers Responding to ETC Contact	Number of Non-Responding Subscribers	Number of Subscribers Responding That They Are No Longer Eligible	Number of Subscribers De-enrolled or Scheduled to be De-Enrolled as a Result of Non-Response or Ineligibility	Number of Subscribers Who De-Enrolled Prior to Recertification Attempt
2677	1589	1088	0	1088	441

**AND/OR**

*In the space below, please list the program eligibility data sources, such as ETC access to a state database and/or notice of eligibility from the state Lifeline administrator or the Universal Service Administrative Company (USAC) and indicate for which qualifying programs (e.g., SNAP, SSI) these sources are used to verify subscriber eligibility. If any of subscribers are subsequently contacted directly by the ETC in an attempt to recertify eligibility, those subscribers should be listed in columns D through I as appropriate and not in columns J through L.*

- B) I certify that the company listed above has procedures in place to re-certify consumer eligibility by relying on \_\_\_\_\_. Results are provided in the chart below. I am an officer of the company named above. I am authorized to make this certification for the Study Area(s) listed above. Initial \_\_\_\_\_

J	K	L
Number of Subscribers Whose Eligibility was Reviewed By State Administrator ETC Access to Eligibility Data or by USAC	Number of Subscribers De-Enrolled or Scheduled to be De-Enrolled as a Result of Finding of Ineligibility by State Administrator, ETC Access to Eligibility Data or USAC	Number of Subscribers Who De-Enrolled Prior to Recertification Attempt
0	0	0

**OR**

- C) I certify that my company did not claim federal low income support for any Lifeline subscribers for the February Form 497 data month for the current Form 555 calendar year. I am an officer of the company named above. I am authorized to make this certification for the Study Area(s) listed above. Initial \_\_\_\_\_

**Section 3: ALL ETCS MUST COMPLETE SECTION 3 –De-enroll percentage**

***What is the percentage of subscribers de-enrolled for this ETC?***

<b>M</b>	<b>N</b>	<b>O</b>	<b>P = N + O</b>	<b>Q = ((P ÷ M) * 100)</b>
<b>Number of Subscribers Claimed on February FCC Form(s) 497</b> <i>(From Column A)</i>	<b>Number of Subscribers De- Enrolled or Scheduled to be De-Enrolled as a Result of Non-Response or Ineligibility</b> <i>(From Column H)</i>	<b>Number of Subscribers De- Enrolled or Scheduled to be De-Enrolled as a Result of a Finding of Ineligibility</b> <i>(From Column K)</i>	<b>Total Number of Subscribers De-Enrolled or Scheduled to be De-Enrolled</b>	<b>Percentage of Subscribers De-Enrolled or Scheduled to be De-Enrolled that were Claimed on the February FCC Form(s) 497</b>
3842	1088	0	1088	28%

**Section 4: ALL ETCS MUST COMPLETE APPROPRIATE CHECK BOX; PRE-PAID ETCS MUST COMPLETE ALL OF SECTION 4**

***Is the ETC Pre-Paid?***

**Yes** ☐ **No** ☒ *(A Pre-Paid ETC does not assess or collect a monthly fee from its Lifeline subscribers)*

*If yes, record the number of subscribers de-enrolled for non-usage by month in column S below.*

***Non-Usage Results Applicable to Pre-Paid ETCS:***

<b>R</b>	<b>S</b>
<b>Month</b>	<b>Subscribers De-Enrolled for Non-Usage</b>
January	
February	
March	
April	
May	
June	
July	
August	
September	
October	
November	
December	

**Signature Block: ALL ETCS MUST COMPLETE SIGNATURE FIELDS**

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area(s) listed above.

Signed,

Robert J. Irving, Jr.

Signature of Officer

Chief Legal and Administrative Officer

Title of Officer

Maheen Siddiqui

Person Completing this Certification Form

Robert J. Irving, Jr.

Printed Name of Officer

Jan-28-14

Date

858-882-6216

Contact Phone Number

[illegible][illegible][illegible]

[illegible]



**BEFORE**  
**THE PUBLIC SERVICE COMMISSION OF**  
**SOUTH CAROLINA**

IN RE:

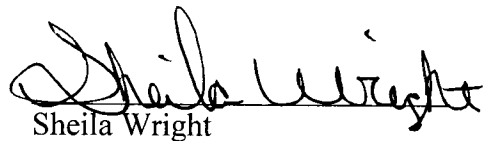
Cricket Communications

)  
)  
)  
**CERTIFICATE OF SERVICE**

\_\_\_\_\_

This is to certify that I have caused to be served this day one (1) copy of **Cricket Communications, Inc.'s Federal Communications Commission (FCC) Form 5551 – Annual Lifeline Eligible Telecommunications Carrier Certification Form**, via United States Postal Service to the address below:

Honorable C. Dukes Scott  
**Office of Regulatory Staff**  
1401 Main Street, Suite 900  
Columbia, South Carolina 29201

  
Sheila Wright

Columbia, South Carolina  
This 31<sup>st</sup> day of January, 2014.